



# State of New Hampshire 2004 ANNUAL REPORT

The following information shall be given as of January 1  
preceeding the due date Pursuant to RSA 293-A:16.22.

**REPORT DUE BY April 1, 2004**

ANNUAL REPORTS RECEIVED AFTER APRIL 15, 2004,  
WILL BE ASSESSED A \$50.00 LATE FEE.

Filed  
Effective Date: 02/15/2004  
Business ID: 326052  
William M. Gardner  
Secretary of State  
200404690038

**LENDERLIVE NETWORK, INC.**

**4500 CHERRY CREEK DR S #200  
GLENDALE, CO 80246**

**ADDRESS OF PRINCIPAL OFFICE:**

**4500 CHERRY CREEK DR S #200  
GLENDALE, CO 80246**

**REGISTERED AGENT AND OFFICE:**

**C T CORPORATION SYSTEM  
9 CAPITOL ST  
CONCORD, NH 03301**

ENTITY TYPE: CORPORATION

BUSINESS ID: 326052

STATE OF DOMICILE:

FEDERAL ID: 621796508

ENGAGE IN THE ORGANIZATION, PROCESSING, PURCHASE & SALE  
OF RESIDENTIAL LOANS

If changing the mailing or principal office address, please check the appropriate box and fill in the necessary information.

The new mailing address \_\_\_\_\_

The new principal office address \_\_\_\_\_

PO Box is acceptable.

**OFFICERS**

NAME AND BUSINESS ADDRESS (P.O. BOX ACCEPTABLE).

(MUST LIST AT LEAST ONE OFFICER BELOW)

PRES **GARRETT OWEN WHITE**  
STREET **4500 CHERRY CREEK DR. S., #200**  
CITY/STATE/ZIP **GLENDALE, CO 80246**

SEC'Y **RICHARD ROY HOLSCRAW**  
STREET **4500 CHERRY CREEK DR. S., #200**  
CITY/STATE/ZIP **GLENDALE, CO 80246**

NAME .....  
STREET .....  
CITY/STATE/ZIP .....

NAME .....  
STREET .....  
CITY/STATE/ZIP .....

NAMES AND ADDRESSES OF ADDITIONAL OFFICERS AND DIRECTORS ARE ATTACHED

**BOARD OF DIRECTORS**

NAME AND BUSINESS ADDRESS (P.O. BOX ACCEPTABLE).

(MUST LIST AT LEAST ONE DIRECTOR BELOW)

NAME **GARRETT OWEN WHITE**  
STREET **4500 CHERRY CREEK DR. S., #200**  
CITY/STATE/ZIP **GLENDALE, CO 80246**

NAME **RICHARD ROY HOLSCRAW**  
STREET **4500 CHERRY CREEK DR. S., #200**  
CITY/STATE/ZIP **GLENDALE, CO 80246**

NAME **SHRIKANT CHANDULAL MEHTA**  
STREET **354 INDUSCO COURT**  
CITY/STATE/ZIP **TROY, MI 48083**

NAME **ROGER DEAN PARSONS**  
STREET **354 INDUSCO COURT**  
CITY/STATE/ZIP **TROY, MI 48083**

To be signed by an officer, Director, or any other person authorized by the board of directors.

I, the undersigned do hereby Certify that the statements on this report are true to the best of my information, knowledge and belief.

Sign here: **RICHARD ROY HOLSCRAW**

**Please print name and title of signer: RICHARD ROY HOLSCRAW / SECRETARY**

NAME TITLE

REPORT FEE IS: **\$100.00**

E-MAIL ADDRESS (OPTIONAL): \_\_\_\_\_



**WHEN THIS FORM IS ACCEPTED BY THE SECRETARY OF STATE, BY LAW IT WILL BECOME A  
PUBLIC DOCUMENT AND ALL INFORMATION PROVIDED IS SUBJECT TO PUBLIC DISCLOSURE  
REQUIRED INFORMATION MUST BE COMPLETE OR THE REGISTRATION REPORT WILL BE REJECTED**

MAKE CHECK PAYABLE TO SECRETARY OF STATE  
RETURN COMPLETED REPORT AND PAYMENT TO:

New Hampshire Department of State, Annual Reports, P.O. Box 9529, Manchester, NH 03108-9529

# 2004 ANNUAL REGISTRATION REPORT

## NAMES AND ADDRESSES OF ALL OTHER OFFICERS AND DIRECTORS:

### DIRECTOR

BELA MEHTA

354 INDUSCO COURT

TROY, MI 48083